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CONFIRMATION NO. 3709

SERIAL NUMBER 09/400,708	FILING OR 371(c) DATE 09/21/1999 RULE	CLASS 709	GROUP ART UNIT 2465	ATTORNEY DOCKET NO. NEO1P018.US01
APPLICANTS MICHAEL L. GOUGH, BEN LOMOND, CA;				
** CONTINUING DATA *****				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 10/12/1999				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ <div style="display: flex; justify-content: space-between; width: 100%;"> Examiner's Signature Initials </div>	STATE OR COUNTRY CA	SHEETS DRAWING 12	TOTAL CLAIMS 16	INDEPENDENT CLAIMS 3
ADDRESS 45965				
TITLE METHOD AND ARTICLE OF MANUFACTURE FOR AN AUTOMATICALLY EXECUTED APPLICATION PROGRAM ASSOCIATED WITH AN ELECTRONIC MESSAGE				
FILING FEE RECEIVED 445	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<div style="border: 1px solid black; padding: 2px; margin-bottom: 2px;"><input type="checkbox"/> All Fees</div> <div style="border: 1px solid black; padding: 2px; margin-bottom: 2px;"><input type="checkbox"/> 1.16 Fees (Filing)</div> <div style="border: 1px solid black; padding: 2px; margin-bottom: 2px;"><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)</div> <div style="border: 1px solid black; padding: 2px; margin-bottom: 2px;"><input type="checkbox"/> 1.18 Fees (Issue)</div> <div style="border: 1px solid black; padding: 2px; margin-bottom: 2px;"><input type="checkbox"/> Other _____</div> <div style="border: 1px solid black; padding: 2px;"><input type="checkbox"/> Credit</div>		